Performance

Report

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| Name of service: | Bert England Lodge |
| Service address: | 111 Woodbridge Drive COOLOONGUP WA 6168 |
| Commission ID: | 7191 |
| Approved provider: | The Bethanie Group Incorporated |
| Activity type: | Assessment Contact - Site |
| Activity date: | 10 August 2023 |
| Performance report date: | 30 August 2023 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Bert England Lodge (**the service**) has been prepared by M Glenn, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with consumers, representatives, staff, management and others.

The provider did not submit a response to the assessment team’s report.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant |

Findings

High impact or high prevalence risks associated with the care of consumers are identified through assessment processes and management strategies are developed and documented in care plans to ensure care and services are delivered in line with consumers’ assessed needs and preferences. Care files demonstrated appropriate assessment and strategies to mitigate risks relating to falls, pressure injuries, pain and weight loss. General practitioners and allied health specialists were also noted to be involved in assessment of high impact or high prevalence risks. Meeting minutes evidenced all consumers who have incidents are discussed at fortnightly multidisciplinary meeting to evaluate current strategies and discuss any further interventions required. Staff were able to identify consumers at risk and described what they do to minimise these risks, and the majority of consumers and representatives interviewed were satisfied with how consumers’ high impact or high prevalence risks are managed.

For the reasons detailed above, I find requirement (3)(b) in Standard 3 Personal care and clinical care compliant.

# Standard 7

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| Human resources | |  |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |

Findings

The workforce was found to be competent and to have the qualifications and knowledge to effectively perform their roles. Staff receive ongoing monthly training relevant to their roles, and mandatory annual competencies are assessed. A learning and development team oversee mandatory training and coordinate education that is specific to the site in response to audits or identified needs. Clinical nurse educators and aged care clinical mentors are utilised, and workshop events have been developed for different roles across different topics to support ongoing learning and continuous improvement. Staff competency is assessed ongoing through various mechanisms, such as performance appraisals, observations, feedback processes, and ongoing training to ensure staff have the qualification skills and knowledge needed for effective job performance. Overall, consumers and representatives interviewed said staff perform their duties effectively, and they are confident that staff are skilled to meet consumers’ care needs.

For the reasons detailed above, I find requirement (3)(c) in Standard 7 Human resources compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)